STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Hoven Review & Tolstoy Journal		2. DATE OF FILING Oct. Oct. 10, 2000
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE 21-24-26
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION *(Street, City, County, State and ZIP+4 Code) (Not printers)* Box 37, Hoven, SD 57450-0037		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER *(Not printer)* Hoven Review, Box 37, Hoven, SD 57450-0037		
6. FULL NAME OF PUBLISHER: Leona C. Wager		
7. OWNER *(If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.* FULL NAME — COMPLETE MAILING ADDRESS Same as above		
8. KNOWN BONDHOLDERS, MORTGAGEES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES *(If there are none, so state. If more space is needed, list on back of this form)* None		

9. EXTENT AND NATURE OF CIRCULATION *(See instructions on reverse side)*	AVERAGE NO. COPIES EACH ISSUE D PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUE NEAREST TO FILING DATE
A. TOTAL NO. COPIES *(Net Press Run)*	900	900
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales	100	100
2. Mail Subscription *(Paid and or requested)*		
C. TOTAL PAID AND/OR REQUESTED CIRCULATION *(Sum of 10B1 and 10B2)*	880	880
D. FREE DISTRIBUTION BY MAIL, CARRIER OR OTHER MEANS		
SAMPLES, COMPLIMENTARY, AND OTHER FREE COPIES		
E. TOTAL DISTRIBUTION *(Sum of C and D)*	890	890
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	10	10
2. Return from News Agents		
G. TOTAL *(Sum of E, F1 and 2 -- should equal net press run shown in A)*	900	900

I swear that the statements made by me above are correct and complete.

SIGNATURE AND TITLE OF PUBLISHER, BUSINESS MANAGER OR OWNER

State of South Dakota)
: S
County of Potter)

(Seal)

Sworn to before me this 6 day of October, 2000

Notary Public

My commission expires

FRANCIS R. KARST
Notary Public, POTTER COUNTY, S. DAK.
My Commission Expires April 24, 2003

Form: SOS REC 051 01/93